FREQUENTLY ASKED IMMUNIZATION QUESTIONS 2006 - 2007 SCHOOL YEAR

1. What is the four-day grace period and when can it be used?

A. CDC and ACIP allow a 4-day grace period. If a vaccine is given up to 4 days before the minimum recommended interval or age for administration of the vaccine, it can be counted as valid. However, this does not change the recommended schedule for routine vaccine administration.

2. Why are only 3 doses of DTaP/ DT / Td / Tdap required for second grade and above when five are required for first grade?

A. DTaP/DTP/DT/ are licensed for children 6 years of age and younger. Td is used for children 7 years and above. Tdap is licensed for individuals ages 10 to 64. If a child presents for vaccination for the first time at 7 years of age, only three doses of Td are required to bring that child up to date. Because of this, the school can only hold the child responsible for the minimum requirement (3 Td).

3. When are only 3 doses of Polio vaccine required?

A. Three doses of all OPV or all IPV are acceptable if the third dose was given on or after the child's fourth birthday.

4. When are 4 doses of Polio vaccine required?

A. Four doses of polio are considered a complete series. When any combination of IPV and OPV is used, then 4 doses are required regardless of age. The only exception is as follows: three doses are acceptable if the third dose was given after the 4th birthday and only one type of vaccine was used.

5. Must the fourth dose of polio vaccine be given on or after the fourth birthday?

A. No. According to the Pink Book, "If a child receives both types of vaccine, four doses of any combination of IPV or OPV by age 4-6 years of age is considered complete".

6. If a child has received 4 doses of polio vaccine before the age of 4 is the series complete?

A. Yes. If a child has 4 doses of polio vaccine before the age of 4 and the minimum intervals are met (4 weeks between doses) the series is complete.

7. What are the minimum intervals for Hepatitis B vaccine?

A. The minimum intervals between vaccine doses are:

Dose 1 and 2 is 4 weeks (28 days)

Dose 2 and 3 is 8 weeks (56 days)

Note: (the 3rd dose can be given no earlier than 164 days (24 weeks of age)

8. What must be included in a child's immunization record?

A. The record must contain the child's name, date of birth, and a date for each immunization (month/day/year). Month and year are acceptable if it documents that the vaccine was given at the appropriate age (410 IAC 1-1-4).

9. What is considered adequate documentation of an immunization history?

A. Adequate documentation is as follows; a physician's written documentation, an immunization record from another school corporation, or a record maintained by the parent. This documentation must include the month and year during which **each dose** of vaccine was administered (month/day/year are recommended, but by rule 410 IAC 1-1-4, month and year is acceptable)

10. What is the minimum age for the MMR to be counted as a valid dose?

A. For the MMR to be counted as a valid dose it must have been given on or after the first birthday; thus documentation for this vaccine must contain month/day/year (exception: 4 day grace period)

11. Will the requirements for the second MMR progress on each year?

A. Yes. This year all children kindergarten through 12th grade are required to have the second MMR.

12. May a Chiropractor give a medical exemption for vaccination?

A. No. Only a licensed physician (M.D., D.O.). A Nurse Practitioner and Physician's Assistant under a physician's supervision can also give a medical exemption.

13. What must a medical exemption contain?

A. A physician's certification that a particular immunization is **detrimental** to the child's health. It must be in writing, and must be verified each year by the school.

14. What must a religious objection contain?

A. A religious objection must be in writing and state that the objection to immunization is based on religious grounds; signed by the child's parent; and delivered to the school. There is no requirement of proof. The school must verify the statement each year.

15. Is there a philosophical objection allowed in Indiana?

A. **No.** There are only two exemptions allowed, religious and medical.

16. If a child does not present an immunization record, or is not up to date with his/her immunizations, may they enroll in school?

- A. Yes. The code states that a child is **not permitted to attend** school beyond the first day without furnishing a written record, unless:
 - 1. The school gives a waiver (for a period not to exceed 20 days); or
 - 2. The local health department, or a physician, determines that the child's immunizations have been delayed due to extreme circumstances, and that the required immunizations will not be completed by the first day of school. The parent must furnish a written statement and a time schedule approved by a physician or health department; or
 - 3. A medical or religious exemption is on file.

17. Is a doctor's statement required as proof of chicken pox disease?

A. No, documentation from a parent is sufficient. A written statement is needed, which must be signed and dated indicating the date of disease. Example: if a parent cannot recall exact dates, something as simple as stating the spring of 2000 is acceptable.

18. Will the requirement for the Hepatitis B series and Varicella (Chickenpox) progress to second grade and beyond?

A. No. The legal requirement for the Hepatitis B series and Varicella is written differently from the other required vaccines. It states that "Every child residing in Indiana who enters kindergarten or grade 1 shall be immunized against Hepatitis B and chickenpox." The law is clear as to the residency of the child at the time that child enters kindergarten or grade one. A child coming from another state and enrolling at the second grade or above does not meet the above statutory requirements.

19. For which vaccine requirements are laboratory evidence of immunity not acceptable?

A. Laboratory evidence is not acceptable for Pertusis. (It is acceptable for all other required antigens)

20. Do I count as complete those children who have documented laboratory evidence of immunity or a written physician's statement showing history of disease?

A. Yes, with the exception of Rubella or Pertusis when a statement of disease is not acceptable.